

EXHIBIT 20

Sent: 7/14/2017 9:38:42 AM
To: Maria D. Padin [Maria.D.Padin@hitchcock.org]; Edward J. Merrens [Edward.J.Merrens@hitchcock.org]
CC: Daniel P. Herrick [Daniel.P.Herrick@hitchcock.org]
Subject: RE: PRAF - OB/GYN Generalist
Attachments: Generalist- Provider Request Assistance Form (PRAF)6-30-2017.docx

Good morning,

Thank you for coming to talk to the OBGYN department today. It was helpful for people to hear from you about the bigger picture and was a positive way for us to start moving forward.

I want to follow up on the status of this PRAF for a 1.0 Generalist and see if it has been approved.

I did an analysis this week to determine how many Generalist we need, and when I return from vacation I will submit those proposals as well.

Heather

Heather L. Gunnell
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From: Heather L. Gunnell
Sent: Friday, June 30, 2017 9:16 AM
To: Maria D. Padin <Maria.D.Padin@hitchcock.org>; Edward J. Merrens <Edward.J.Merrens@hitchcock.org>
Cc: Daniel P. Herrick <Daniel.P.Herrick@hitchcock.org>; Leslie R. DeMars <Leslie.R.DeMars@hitchcock.org>
Subject: PRAF - OB/GYN Generalist

Good Morning,

This PRAF is for a 1.0 cFTE General OB/GYN. Please let me know if you need more information.

Thanks,
Heather



Heather L. Gunnell
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D-H PROVIDER SEARCH INITIATION

Approval and Justification Process Summary & Request Form

All Dartmouth-Hitchcock (D-H) provider searches – backfills or new positions – must have explicit approval from the Organizational Hiring Approval Authority, D-H Service Line Leader (SLL) (and Academic Chair, if not the same individual and the position requires an academic appointment) and/or Local Approval Authority and the budgeting office before a search can begin. Approval must be obtained and documented before Talent Acquisition can begin work on a search.

Search Approval Process:

1. Hiring Manager or operational designee completes Provider Recruitment Assistance Form (PRAF)
2. Hiring Manager sends PRAF to Local Approval Authority to review/approve
 - a. D-H Lebanon: Service Line Leader (SLL)
 - b. CGP: Steve Boyce
2. Local Approval Authority forwards PRAF to Organizational Approval Authority (Ed Merrens for all provider searches) and cc's Belinda Peavey and Recruiter
3. Once approval is received, Hiring Manager enters requisition into Hiring Manager and attaches approved PRAF
4. Search initiation and sourcing begins

** For Affiliates seeking assistance with provider recruitment, we understand the 'approver' of positions may vary from location to location. Approval to initiate a provider search may come to Talent Acquisition by the CEO, CMO or appropriate approving physician or operational leader at each entity. We ask that this leader also notify the D-H Hiring Approval Authority & D-H SLL to ensure discussions at the regional planning level are taking place.*

Faculty Appointments: When a position requires a faculty appointment at Geisel, the hiring Department is responsible for submitting the new search via the 'Form A' to Dashboard for tracking purposes by the Dean's office. Additional instructions on the Geisel Faculty appointment can be found on the Talent Acquisition intranet site.

Please note, as a team we are serving a variety of D-H and Affiliate customers across the region. Many of which may have "competing" positions open at any given time. The Talent Acquisition process will be a transparent one, across the system and Affiliates. We also ask for transparency in return, so that we can fully and accurately represent the needs of both D-H and our community partners.

- ***All required details must be completed on the PRAF Form to initiate a search***

PROVIDER RECRUITMENT ASSISTANCE FORM – APPROVAL AND JUSTIFICATION

SERVICE LINE/DEPARTMENT/HOSPITAL/PRACTICE INFORMATION <i>*Required Field</i>	
*D-H SERVICE LINE:	OB/GYN
*D-H OR AFFILIATE LOCATION: (DH Keene, DH Lebanon, DH Nashua, New London Hospital, etc) <i>List both primary and any additional locations provider is expected to practice</i>	DH Lebanon
*DEPARTMENT/PRACTICE: (Medicine, Surgery, Plymouth Pediatrics, etc.)	Obstetrics and Gynecology
*HIRING MANAGER/ CLINICAL LEAD: (Who is the clinical point person that TA will partner with on search?)	Dr. Regan Theiler
*ADMINISTRATIVE POINT PERSON (Scheduling interviews, onsite coordination, etc.):	Barbara Bragg
<i>Other than the Hiring Manager & Admin Point person, who else should be included in the Intake (kick-off) Meeting to review position details?</i>	Heather Gunnell
POSITION INFORMATION <i>*Required Field</i>	
*Requisition #: (D-H Lebanon & CGP only)	38319
*PHYSICIAN, NP, PA, CRNA, PhD, ETC:	Physician
*TOTAL FTE STATUS: Standard weekly hours:	1.0
*CLINICAL FTE (by division) (e.g., 1.0 cFTE: 0.5 Keene, 0.5 AMC)	1.0
*POSITION/SPECIALTY:	General OB/GYN MD
*TITLE (Faculty, Staff, Chief, Med Director, etc?):	Faculty

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If Faculty – anticipated or desired Appointment rank:	Assistant Professor
*TARGET START DATE: (When do you need this person?)	May 2017
*COMPENSATION RANGE FOR SPECIALTY (starting & end point):	\$220,000 – \$370,000
TARGET COMPENSATION:	\$267,000
*ANTICIPATED HOURS/SHIFTS:	Full time for physician (10 shifts plus call) Call will be shared equally among the providers for the birthing pavilion.
*DEPT/COST CENTER INFO (D-H only): (x-xxx-xxxxx, ex: B - 001-53215)	B001=16100
*Describe how this position's responsibilities/activities are critical and essential to D-H core operating priorities (e.g. direct patient care, research, education).	
This position is essential for provision of direct patient care in the Ob/Gyn clinic, operating rooms, and Birthing Pavilion. We have a shortage of subspecialists and generalists in the department, with generalists being both easier to recruit and more flexible in terms of clinical assignments.	
*What are the current methods for accomplishing these activities? Include the associated cost and time required as well as the resources required, e.g. staff, equipment, supplies, etc.	
We have covered these duties with a combination of faculty, but the recent departure of Dr. Karen George at 0.9 FTE has made it difficult to cover while maintaining clinical volumes and safety. Dr. George's departure resulted in a 20% loss in capacity. We are fully booked in clinics, with increasing OR volumes, and we have had little room for any absences even before this critical faculty departure.	
*Can the work be completed with existing staff? If so, what are the impacts? Is there any work currently being performed that can be eliminated in order to assign or redistribute the work/responsibilities of this position? If so, what are the impacts? Are there other cost effective alternatives to accomplish the work other than adding/filling this position, for instance, can the work be outsourced and if so, at what cost?	
We have no capacity to fill in these duties with existing staff. In the past we would have looked to subspecialists to fill in components of the work, but given critical vacancies in urogynecology, maternal-fetal medicine and the recent closure of REI, our colleagues are not in a position to offer flexibility. We have two maternity leaves this summer/fall among our remaining faculty, making the situation more urgent. We are in the process of recruiting a locum tenens assistance to maintain basic services until we can make a permanent hire.	
*What are the implications of not filling this position?	

If this critical position is not filled, the generalist Ob/Gyn faculty will be limited to covering only the most urgent of clinical duties. This generally means ensuring safety on the birthing pavilion and staffing urgent OR cases, in addition to covering resident precepting clinics as available.

The cost will be significant lost volume in the areas of faculty clinic visits, office procedures, scheduled OR cases, and resident clinics. Secondary costs will be increased on-call burden and burnout among both MFM and general OB/Gyn faculty as our call pool for obstetrics shrinks again. We will additionally be quite limited in the ability to allow faculty vacations/CME during this year, which bodes poorly for retention of existing faculty.

OPERATIONAL METRICS (HIRING SECTION/SPECIALTY)

**Required*

*SPECIALTY/SECTION		FY17 YTD AMC	FY17 YTD CGP	FY17 YTD Keene
	MD Productivity Percentile (e.g., 50 th)	40 th	20 th	23 rd
	Referral-to-appointment	28 days	21 days	N/A
*NEW PROVIDER		Year 1	Year 2	Year 3
	wRVUs	5781	6056	6605
	Productivity percentile	30 th	35 th	45 th
	Appointments	770	807	885
	OR cases (if applicable)	130	139	152
	Discharges (if applicable)	160	169	186

APPROVALS

	Name/e-signature	Date Approved
OPERATIONAL MANAGER:	Heather Gunnell	6/29/2017
SERVICE LINE LEADER/LOCAL HIRING AUTHORITY:	Dr. Leslie DeMars	6/29/2017
ACADEMIC CHAIR <i>(academic appointment positions only)</i>	Dr. Leslie DeMars	6/29/2017

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D-H FINANCE REVIEW		
ORG APPROVAL AUTHORITY (Ed Merrens, MD)		

By signing and submitting this document to Talent Acquisition, you confirm that you have obtained approval to recruit and hire into this position by your Service Line Leader (and Department Chair, if a separate individual) or Hospital representative (Affiliates). Signatures must be original or a clear email chain of approval must be included with the Justification.